## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

## 10/543191 FILING DATE

APPLICANT(S)

## **CLAIMS**

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TOTAL CLAIMS			34		***************************************	

PTO - 1360 (REV. 11/04)

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TOTAL CLAIMS	300	S. DEPART	48				

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